# 21152

#### STATE OF NEW HAMPSHIRE

#### 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## RECEIVED

APR 18 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

#### PLEASE PRINT

I. Name of Lobbyist(s) Robert Clegg, Debra Vanderbeek, Periklis Karoutas, Leann Moccia

II. Name of lobbyist	t's partnership, firm	or corporation, if any:		
	Legislative Solution	ns, L.L.C.		
(Na	ame of partnership, firm	or corporation)		
	P.O. Box 10724	Bedford	NH	03110
Business Address: (S	Street)	(Town/City)	(State)	(Zip Code)
( ) 603-860-36	582 (	)	e-mail senclegg@	@aol.com
(Telephone)		(Fax)		
III. This statement	covers: (Choose one	– file separate reports f	or each client, OR you m	ay file a separate report for
		re not attributable to a		
X All reportable tra	nsactions occurring in	the months prior to the	reporting date relative to the	a following client:
A m repertative du			reporting date relative to in	ie following chefit.
		ice for Solar Choice		
OR	(Full Name of Client	t as it appears on the Lobby	ist Registration Form)	
	sactions by the lobby	ist (including the lobbyi	st's family), or the lobbying	g firm listed below which are
unrelated to any parti		(		s
	N	1		
IV. Date of Report Reports cover: acti	April 25, 2018 🛚 Xivity from date of registi		July 25, 2018 activity from 4/1/18 to 6/30/18	,
reports cover. uch	October 31, 2018		January 30, 2019 $\Box$	•
	activity from 7/1/18 to		activity from 10/1/18 to 12/31	/18
			nnsactions made since t ecretary of State's Office, S	
Concord, NH 03301.	, compress y list ville y or	m and summer to the St	or crary of state a office, is	nuic 110use, 1100m 204,
VI. Check if addition	nal reports are attac	hed:		
_ 4	-		Addendum A— Fees and E	xpenses
	an honorarium or rein		oust file <b>Addendum B</b> – Re	
☐ If you, your firm,	, or your family has m	nade political contributio	ns, you must file <b>Addendu</b>	m C-Political Contributions
_				
	ffirmation by Lobby RSA 15-B. RSA 14-C		y swear or affirm that the t	foregoing information is true
	est of my knowledge		y swear or arriver that the	torogonig information is true
X/Q/9	( lex)		April 9, 2018	
(Signature of lobbyis	st)		(Dat	te)
Robert Clegg	<b>○</b> 0			
(Print Name of lobby	vist)	<del></del>		

#### STATE OF NEW HAMPSHIRE



## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert Clegg, Debra Vanderbeek, Periklis Karout	tas, Leann Moccia, Chris Herr
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client The Alliance for Solar Choice	Date April 9, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 9,000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ <u>0</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 9,000.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all ele: meals purchased during a business sets than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 four of greater than \$25, purchase of er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$9,000.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 9,000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0</u>
f) Total of all expenses year to date	f) \$9,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affin	rm that the foregoing informatio
is true and complete to the best of my knowledge and belief.	April 9, 2018

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

## **Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:**

Name of Lobbying par	tnership, firm, or corpo	oration: Legislative Solutio	ns, L.L.C.
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check	one):		
April 25, 2018 🐧	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s	s).		
Addendum B(s	s).		
Addendum C(s	s).		
	m that the foregoing in my knowledge and bel		nt and each Addendum is true and
	VM	April	9, 2018
(Signature of lobbyist)			(Date)
Debra Vanderbeek			
(Print Name of lobbyis	t)		

## State of New Hampshire Signature Form for Associated Lobbyist

RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

## Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying par	tnership, firm, or corpo	oration: Legislative Solution	ns, L.L.C.
Name of Client (leave	blank if Statement is for	or the partnership, firm, or	corporation and not related to a
particular client):	The Alliance for	Solar Choice	
Date of Report (check	one):		
April 25, 2018 💆	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			d Expenses described above, a imber of Addendum forms bei
Addendum A(	s).		
Addendum B(	s).		
Addendum C(	s).		
	m that the foregoing in my knowledge and be	lief.	at and each Addendum is true a
(Signature of lobbyist)		April	9, 2018 (Date)
(Signature of 1000yist)			(Dute)
Periklis Karoutas			
(Print Name of Johnyis	it)	<del></del>	

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

**Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:** 

Name of Lobbying part	nership, firm, or corpo	oration: Legislative Solutio	ns, L.L.C.
Name of Client (leave b	olank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check o	one):		
April 25, 2018 🗖	July 25, 2018 □	October 31, 2018	January 30, 2019 □
I have read RSA 15, R3 the following Addendu submitted):	SA 15-B, RSA 664, the ms submitted with the	ne Statement of Income an at Statement (insert the nu	nd Expenses described above, and umber of Addendum forms being
Addendum A(s)	).		
Addendum B(s)	) <b>.</b>		
Addendum C(s)			
Low I		ief.	nt and each Addendum is true and
(Signature of lobbyist)			(Date)
Leann Moccia (Print Name of lobbyist			